Indiana State Police Clandestine Laboratory Occurrence Report This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date:	10/13/2013	Address:	415 N. 2 ND ST.
Incident #:	13ISPC010313		ELKHART, IN 46516
County :	ELKHART-20		
Type of Laboratory Seizure (check one)		Seizure Location (check all that apply)	
☑ Operational Lab☐ Chemical/Glassware/Equipment (only)☐ Dumpsite (only)		Residence Outbuilding Vehicle	☐ Hotel/Motel ☐ Open – No Structure ☐ Other:
Items Found: Location (bedroom, kitchen, open air, etc) (check all that apply)			
Red Phosphorous/Iodine Reaction(s):			
Flammable Solvents:			
Water Reactive Metal (Lithium): <u>foyer</u>			
Anhydrous Ammonia:			
Corrosive Acid:			
Corrosive Base:			
Other (item and location):			
Vehicle Information:			
Owner: VIN: Year:	N/A	Make: Model:	
☐ Yes ☐ No	age 18 discovered (check appropriate) (number present) not present but evidence they reside	unclean Estimated let occurring: <u>U</u> Additional Ir	nformation: <u>CHILDREN IN</u> BUT NOT IN EMPTY
This report l	has been faxed* or emailed to the fo	llowing agencies tha	at serve the location:
Health Depar	ent City, Township or County <u>574-29</u> tment County: <u>ELKHART</u> of Child Services Hotline: <u>dcshotlinere</u>	Fax: <u>574-8</u>	_
For further information regarding this methamphetamine laboratory, contact Investigating Officer: <u>G.A. DEAL, ISP</u> Phone <u>574-546-4900</u>			

^{*}This form is to be faxed to the Fire Department, Health Department and/or Department of Child Services listed within 24 hours of scene processing.